

Ms. Fleck:

In reference to the performance review of the Interventional Cardiologists, it is my recollection that patient records were also to be included in the review. Section "A. Primary PCI Services" subsection "5. Quality" letter "(c)" as well as Section "B. Elective PCI Program" subsection "4. Quality" letter "e" state only "The performance review shall: (i) Include a review of angiographic images."

The clinical data available in the patient record is absolutely critical to determining the overall appropriateness of the PCI procedure—not every stenosis is appropriate for stenting regardless of the degree of obstruction found on angiography. For example (an extreme example), asymptomatic patients on no antianginal medications with low risk stress findings are deemed as "Inappropriate" for PCI per the latest ACC "Appropriate Use Criteria." The only way to know whether or not a patient should even be in the cath lab in the first place is to reference their record and calculate their appropriate use score based on their clinical characteristics. Unfortunately, the record can be "gamed" (does the patient truly have class III angina?), and our facility has followed the lead of UPMC in that we now require that Appropriate Use scores be provided and the record reviewed before elective cath or PCI's can be scheduled and before ad hoc PCI can proceed. This is not foolproof as it still depends on the patient characteristics inputted by the physician, but some level of trust must exist.

In any case, I feel that including a review of the patient record is crucial and should be included in the policy.

Respectfully,
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